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**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 47079-00013USC3

First Inventor Alfred Thomas

Title Bonus Game For A Gaming Machine

Express Mail Label No. EL 831842201 US, filed September 29, 2003

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO:

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- | | |
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| <p>1. <input checked="" type="checkbox"/> Fee Transmittal Form
<i>(Submit an original, and a duplicate for fee processing)</i></p> <p>2. <input type="checkbox"/> Applicant claims small entity status.
See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages 40]
<i>(preferred arrangement set forth below)</i></p> <ul style="list-style-type: none"> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D Invention - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (<i>if filed</i>) - Detailed Description - Claim(s) - Abstract of the Disclosure <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets 12]</p> <p>5. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages 2]</p> <ul style="list-style-type: none"> a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))
<i>(for continuation/divisional with Box 17 completed)</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S)
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p> | <p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. Nucleotide and/or Amino Acid Sequence Submission
<i>(if applicable, all necessary)</i></p> <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Form (CRF) b. <input type="checkbox"/> Specification Sequency Listing on: <ul style="list-style-type: none"> i. <input type="checkbox"/> CD ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statement verifying identity of above copies |
|---|---|

Accompanying Application Parts

- | |
|---|
| <p>9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney
<i>(when there is an assignee)</i></p> <p>11. <input type="checkbox"/> English Translation Document (<i>if applicable</i>)</p> <p>12. <input checked="" type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations</p> <p>13. <input checked="" type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)
<i>(Should be specifically itemized)</i></p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s)
<i>(if foreign priority is claimed)</i></p> <p>16. <input checked="" type="checkbox"/> Other ...Check No. 136464 for \$768.00.....</p> |
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17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) of prior application No: 09/981,203, filed October 16, 2001

Prior application Information: Examiner John M. Holaling Group/Art Unit: 3713

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS30223

Customer Number or Bar Code Label *(Insert Customer No. or Attach bar code label here)* or New correspondence address below

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Signature			Date	September 29, 2003	

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09/29/03

FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	Art Unit	Not Assigned
TOTAL AMOUNT OF PAYMENT	(\$) 768.00	Attorney Docket No. 47079-00013USC3

METHOD OF PAYMENT (check all that apply)					FEE CALCULATION (continued)				
<input checked="" type="checkbox"/> Check	<input type="checkbox"/> Credit card	<input type="checkbox"/> Money Order	<input type="checkbox"/> Other	<input type="checkbox"/> None	3. ADDITIONAL FEES				
<input checked="" type="checkbox"/> Deposit Account:					Large Entity		Small Entity		
Deposit Account Number 10-0447/47079-00013USC3					Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
Deposit Account Name Jenkens & Gilchrist					1051	130	2051	65	Surcharge - late filing fee or oath
The Commissioner is authorized to: (check all that apply)					1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Credit any overpayments					1053	130	1053	130	Non-English specification
<input type="checkbox"/> Charge any additional fee(s) during the pendency of this application					1812	2,520	1812	2,520	For filing a request for ex parte reexamination
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FEE CALCULATION									
1. BASIC FILING FEE									
Large Entity		Small Entity		Fee Description		Fee Paid			
Fee Code	Fee (\$)	Fee Code	Fee (\$)						
1001	750	2001	375	Utility filing fee		750			
1002	330	2002	165	Design filing fee					
1003	520	2003	260	Plant filing fee					
1004	750	2004	375	Reissue filing fee					
1005	160	2005	80	Provisional filing fee					
				SUBTOTAL (1)		(\$ 750)			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE									
Fee from Extra Claims below					Fee Paid				
Total Claims	21	- 20** =	1	x	18	=	18		
Independent Claims	2	- 3** =	0	x	84	=			
Multiple Dependent					280	=			
Large Entity		Small Entity		Fee Description					
Fee Code	Fee (\$)	Fee Code	Fee (\$)						
1202	18	2202	9	Claims in excess of 20					
1201	84	2201	42	Independent claims in excess of 3					
1203	280	2203	140	Multiple dependent claim, if not paid					
1204	84	2204	42	** Reissue independent claims over original patent					
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent					
				SUBTOTAL (2)		(\$ 18)			
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